

BETHESDA BRAC IMPROVEMENTS
MD 355 (ROCKVILLE PIKE) AND WEST CEDAR LANE/CEDAR LANE

**A \$19,000,000 Grant Proposal to the Office of Economic Adjustment,
U.S. Department of Defense**

**Submitted by the Maryland State Highway Administration, Maryland, Department of
Transportation**

October 7, 2011

***RE: Federal Register Document 2011-184000: Volume 70, Number 140, July 21, 2011
Notice of Federal Funding Opportunity (FFO) for construction of Transportation Infrastructure
Improvements Associated with medical facilities related to recommendations of the 2005
Defense Base Closure and Realignment Commission.***

A. POINT OF CONTACT:

Barb Solberg, Division Chief
Highway Design Division
Office of Highway Development
State Highway Administration
707 North Calvert St.
Baltimore MD, 21202
410-545-8830
BSolberg@sha.state.md.us

B. EXISTING OR PROJECTED TRANSPORTATION INFRASTRUCTURE ISSUE:

- **Relocation of Walter Reed**

The Bethesda Base Realignment and Closure (BRAC) improvement projects are intended to mitigate gridlock, improve pedestrian access and safety, and support multi-modal transportation systems around the new federally-mandated Walter Reed National Military Medical Center. One of the most noteworthy moves mandated by the 2005 BRAC law was the closure of the Walter Reed Army Medical Center (WRAMC) in Washington, D.C., with the relocation of most of its functions and personnel to the campus of the National Naval Medical Center (NNMC) in Bethesda, Montgomery County, Maryland, establishing the joint service Walter Reed National Military Medical Center (WRNMMC). The intent of consolidating these two premier institutions was to establish the modern “crown jewel” of military medical care and research combining the best of Army, Navy and Air Force practices that could serve the needs of the American military facing new kinds of catastrophic injuries in the era following September 11, 2001.

The BRAC expansion will add 2,500 personnel to the 8,000 currently stationed at NNMCMC, and the hospital visitor load will double to almost 1,000,000 visits annually. The road network around NNMCMC is already at capacity and is at Level of Service (LOS) F – or failing, in common vernacular. If left unmitigated, this growth will create untenable gridlock – where the true Level of Service cannot even be measured beyond “F” -- that would negatively affect the ability of wounded warriors, doctors and emergency personnel to access the campus on a timely basis.

- **Impacts of BRAC on Bethesda’s Urban Transportation Infrastructure**

Bethesda is located in Montgomery County, MD which has a total population approaching 1,000,000. Bethesda is in the heart of the National Capital Region and draws employees and visitors to its thriving commercial district from across the Washington-Baltimore Metropolitan area of over 8,000,000 people. The area of Bethesda that is impacted by BRAC is a densely populated and highly developed community inside the Capital Beltway with approximately 56,000 residents and an employment base of 70,000. Bethesda has long-established residential neighborhoods and a thriving commercial district. Along with NNMCMC, the BRAC-impacted area of Bethesda is home to the National Institutes of Health (NIH) which is the largest employer in Montgomery County with over 18,000 on-campus personnel, and Suburban-Johns Hopkins Hospital which is the region’s designated trauma center. The NNMCMC, NIH and Suburban collaborate as the Bethesda Hospitals Emergency Preparedness Partnership.

Suburban-Johns Hopkins Hospital employs over 1,400 people, and has more than 13,000 admissions per year. The hospital also supports more than 40,000 emergency room visits and 90,000 outpatient visits per year.

The NNMCMC is directly across from the NIH campus and currently employs 8,000 personnel. The hospital at NNMCMC receives approximately 500,000 visits per year. By September 2011, BRAC will increase personnel at NNMCMC by almost one-third to 10,200, and will double the Medical Center’s visitor load to approximately 1,000,000 per year. Despite Montgomery County’s sophisticated planning and projection process, the County did not anticipate this rapid level of growth. In most BRAC growth communities, roadway improvements are a common solution to BRAC-related increases in traffic.

The 2005 BRAC law committed billions of dollars to fund BRAC-related construction on the campuses of affected installations, but did not commit funds to help communities improve their transportation infrastructure to meet dramatic and rapid growth due to BRAC. The NNMCMC was able to identify specific impacts of BRAC growth at NNMCMC on Bethesda’s transportation network in its March 2008 Environmental Impact Statement (EIS): *For Activities to Implement 2005 Base Realignment and Closure Actions At National Naval Medical Center Bethesda, Maryland*. In short, the major roadways and intersections that

serve NNMC are already at or approaching LOS F; the BRAC growth would make failing traffic even worse.

The transportation analysis that was part of the EIS identified that all four of the SHA intersections will operate above capacity during peak periods. Most other BRAC growth occurs in areas that are removed from urban population centers, and transportation solutions tend to call for additional highway capacity. However, NNMC's location in a settled and densely populated urban area dictates a combination of approaches. Potential traffic mitigations were identified that focus on roadway, transit, and pedestrian improvements.

- **Necessity of Federal Assistance for Project Completion**

Mitigating BRAC-related congestion will require a multi-modal approach to improve traffic and pedestrian movement and to increase the use of mass transit and other alternative means of transportation. The State of Maryland and Montgomery County are working aggressively to mitigate congestion caused by BRAC consolidation in Bethesda, but it is readily evident that neither the State nor the County has sufficient resources to implement all that is necessary.

This FFO proposal relates to a Maryland State Highway Administration (SHA) project to provide multi-modal highway transportation improvements within a highly urbanized roadway network surrounding NNMC that is already plagued with regular congestion. It is important to note that this project is just one of several designed by the State and County Departments of Transportation to mitigate BRAC-related congestion.

The five major SHA improvement projects, in order of priority are:

1. MD 355 (Rockville Pike) and West Cedar Lane / Cedar Lane;
2. MD 185 (Connecticut Avenue) and Jones Bridge Road / Kensington Parkway;
3. MD 187 (Old Georgetown Road) and West Cedar Lane / Oakmont Avenue;
4. Bethesda Trolley Trail Connections And Passenger Drop-Off Loop, and;
5. MD 355 (Rockville Pike) and Jones Bridge Road / Center Drive.

This project, if funded, would be most effective if all the related projects being submitted by Montgomery County and the State of Maryland are funded. The full program of projects is the result of extensive collaboration with local, state and federal stakeholders in the BRAC actions at NNMC. Priority projects identified by stakeholders have been designed to complement each other, and collectively serve to foster an overall network that meets the considerable transportation challenges associated with BRAC actions in Bethesda. In total, the program will improve traffic operations, promote the use of alternative transportation including mass transit and bicycle and pedestrian facilities, and reduce the use of single occupancy vehicles and the demand for parking at the new Walter Reed National Military Medical Center. These projects, along with improvements to bicycle and pedestrian

facilities already undertaken by Montgomery County, will ensure greater access to WRNMMC for its patients and staff. But for funding from this Office of Economic Adjustment (OEA) Federal Funding Opportunity, these projects cannot be completed.

- **Support from the Defense Department**

The Department of Defense supports these projects and has committed \$28.174 million through the Defense Access Roads program for implementation of the Maryland Route 355 Multimodal Crossing Project. The Navy has made very clear its support for the BRAC projects in development (please see Attachment A, a letter from Captain M. P. Malanoski and Rear Admiral A. L. Stocks), and recognizes the role that they stand to play in addressing the traffic considerations raised in the March 2008 EIS.

Additionally, the Department of Defense, through OEA, has demonstrated support of mitigation projects underway by providing \$450,000 to support design of the SHA intersection improvement program at NNMCM.

- **Road Improvements**

Many visitors and commuters to the military medical campus will arrive by car. The major roads serving NNMCM are mainly state highways. Capacity cannot be increased in this densely developed region without unacceptable community disruption, but relatively low-impact improvements can help facilitate increased traffic flow.

The SHA is engaged in intersection improvement projects that are supported by NNMCM's March 2008 EIS, and SHA anticipates maintaining the same or slightly improved LOS, even with increases of BRAC-related traffic. The SHA is coordinating these projects with traffic flow improvements the NNMCM is planning at its gates on MD 355 (Rockville Pike) and Jones Bridge Road. The SHA projects will also include upgrades to adjoining bicycle and pedestrian paths to accommodate those modes of urban commuting.

When all improvements are constructed, significant benefits will be provided to the entire transportation network. Based on analysis conducted using Synchro traffic simulation software, the intersection improvements are projected to reduce fuel consumption in the study area by approximately 1,300 gallons each day during the peak hours compared to the No-Build condition. Considering an average gas price of \$3.75 per gallon, that equates to a user cost savings of over \$3 million per year in fuel cost alone. Additionally, the proposed intersection improvements are projected to reduce emissions of carbon monoxide (CO), nitrogen oxides (NOx), and volatile oxygen compounds (VOC) by 43% during the AM peak hour and by 28% during the PM peak hour compared to the No-Build condition.

The SHA is submitting proposals to OEA for each BRAC improvement project listed above, and the locations can be seen in Figure 1.

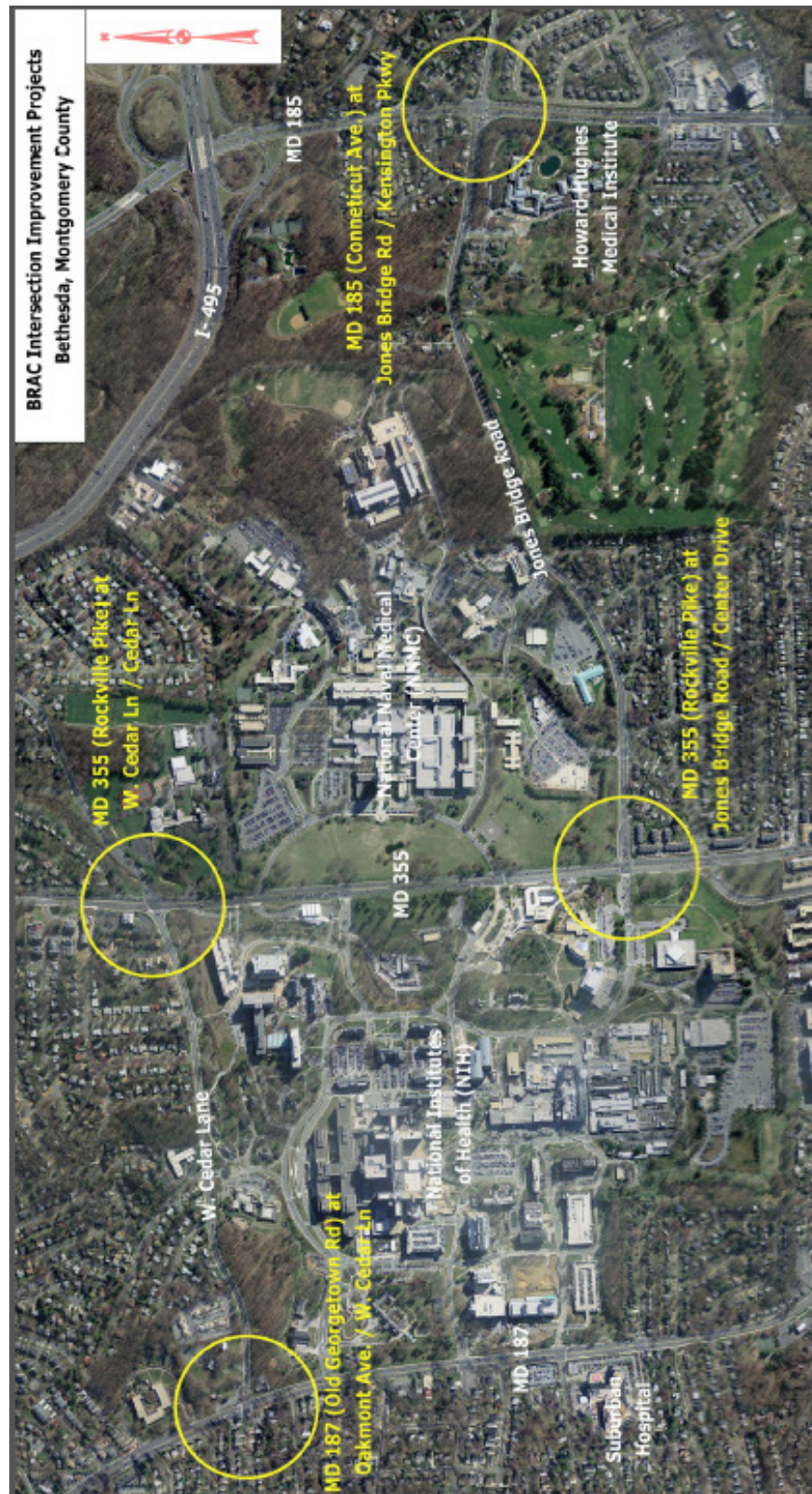


Figure 1: BRAC Improvement Locations

- **Bicycle and Pedestrian Improvements**

BRAC-related growth requires that the State and County's robust bicycle and pedestrian trail network be improved. The SHA and the Montgomery County Department of Transportation (MCDOT) hope to encourage an increase in bicycle commuters and ridership, by connecting existing bike paths and sidewalks with new and expanded paths around NNMCMC. The NNMCMC campus is directly across from the campus of NIH, the world's supreme medical research institution and the largest employer in Montgomery County. Today, NIH has an active bicycle commuter club with over 700 members; NNMCMC will emulate this program as part of its BRAC-related Transportation Management Plan.

- **Commuter Bus Improvements**

State, county, and regional transportation authorities including the Washington Metropolitan Area Transit Authority (WMATA) are working with NNMCMC and NIH to study ways to expand existing bus transit service to accommodate BRAC growth at NNMCMC and expected long-term growth at NIH. This may include expanding or realigning existing routes or establishing new routes utilizing outlying park-and-ride commuter lots. In addition, NNMCMC and NIH are collaborating to provide commercial commuter bus service from numerous points in the Washington-Baltimore region for their personnel.

C. PROJECT DESCRIPTION:

This Grant proposal, if accepted by OEA, would provide \$19.0 million for the intersection improvements at MD 355 (Rockville Pike) and W. Cedar Lane / Cedar Lane. This intersection is the first prioritized project near the NNMCMC in need of improvements to mitigate for additional traffic demand due to BRAC consolidations. The existing intersection currently operates over capacity, with a vehicle delay of 135.7 sec/vehicle during the AM peak hour and 167.5 sec/vehicle during the PM peak hour, which makes it complicated to accommodate additional personnel without substantial infrastructure improvements. If all the intersection improvements at MD 355 and W. Cedar Lane / Cedar Lane are completed, the capacity at the intersection will increase 29% in the AM peak hour, and 38% in the PM peak hour.

This improvement project has been separated into two phases due to the timing and funding constraints, which are Phase 1 - 3 and Phase 4. Phase 1 - 3 consists of widening along northbound and southbound MD 355 from Wilson Drive to W. Cedar Lane / Cedar, and is currently fully funded for engineering design and land acquisition, but requires partial funding for construction. The total cost for this improvement is \$36.3 million. Phase 4 improvements consist of widening along northbound MD 355 north of the intersection with Cedar Lane to just north of Locust Hill Road; funds are need for engineering design, land acquisition, and construction with a total cost of \$11.8 million.

- **MD 355 and W. Cedar Lane / Cedar Lane Phases 1 – 3**

The purpose of this intersection project is to improve the safety, capacity, and operation of the intersection to support the mission of the new Walter Reed National Military Medical Center by addressing transportation needs. The limits of work are along MD 355 between Wilson Drive and Locust Hill Road, which is approximately 2350 feet and along W. Cedar Lane / Cedar Lane between Cedarcrest Drive and Elmhirst Parkway, which is approximately 2016 feet.

Along MD 355, the proposed improvements include construction of an additional northbound through lane from North Wood Road to Cedar Lane and a southbound through lane from Cedar Lane to Wilson Drive; the proposed lanes terminate as exclusive right turn lanes. The proposed design provides four through lanes, and variable width turn bays, as needed, adjacent to a median, for both northbound and southbound MD 355. Two lanes of widening will occur on W. Cedar Lane and Cedar Lane. Both eastbound W. Cedar Lane and westbound Cedar Lane will have two left turn lanes and one through lane at the intersection. Westbound Cedar Lane will also have a through/right lane. Eastbound W. Cedar Lane will have an additional through lane and an exclusive right turn lane.

Due to the roadway widening, the replacement of two culverts within an unnamed tributary to Rock Creek are required, one crossing MD 355 and the other crossing Cedar Lane, which will handle the 100 year and 50 year storms, respectively. In addition, construction of channel walls between the two culverts and stream stabilization upstream and downstream of the culverts will be required.

Pedestrian safety and transit access are also important features in the scope. The intersection ramps, shared use paths, and sidewalks within project limits will be upgraded to comply with the Americans with Disabilities Act (ADA). This project will upgrade the existing shared use path widths from 8 feet to 10 feet on the west side of MD 355, the south side of W. Cedar Lane, and the north side of Cedar Lane within the limits of the project. A 5-foot sidewalk has been included in the design where a shared use path is not being proposed.

The proposed sidewalks and shared use paths have been aligned, wherever possible, to create a three foot to five foot minimum buffer between the back of curb and front edge of sidewalk or shared use path to keep pedestrians and off-road bicyclists separated from the high volume roadway. Right-turn channelization island removal and roadway radius reduction in the northwest, southwest, and southeast quadrants of the intersection will enhance pedestrian safety when crossing this major intersection. Other improvements include reconstruction of traffic signals with installation of pedestrian signals with countdown and audible capabilities, medians to allow for pedestrian cut throughs, drainage improvements, and storm water management (SWM) facilities.

A lead contract for the relocation of the underground utility lines and coordination of overhead utility pole relocations was advertised on July 26, 2011 to keep this project on schedule; it has been fully funded by SHA. At MD 355 at W. Cedar Lane / Cedar intersection, in addition to major utility relocations, the scope of work also includes roadway widening, new roadway connections, NIH gate security modifications, and shared use path construction along the west side of MD 355. At MD 355 and Jones Bridge Road, the scope of work includes reconstruction of pedestrian ramps to be ADA compatible, signal modifications, and advance signing for dynamic lane control.

For the dynamic lane control installation, during the PM peak period, a southbound MD 355 through lane will be converted to a second left turn lane. The dynamic lane control installation will provide a capacity improvement. It is projected to reduce vehicle delay by 51% during the PM peak hour from 104.8 sec/vehicle to 51.8 sec/vehicle. This project advertised on July 26, 2011 and the projected notice to proceed for the successful contractor is November 7, 2011.

- **MD 355 and W. Cedar Lane / Cedar Lane Phase 4**

Phase 4 includes full depth widening on northbound MD 355 north of the intersection with Cedar Lane to just north of Locust Hill Road. Extensive construction of retaining walls is necessary due to bifurcation between MD 355 and a parallel Service Road. This improvement includes the addition of pedestrian accommodations via sidewalk adjacent to MD 355, since no sidewalk or shoulder area exists for pedestrians to safely proceed northward.

Below is a table of the average delay time per vehicle in the AM and PM peak hour through the subject intersection. It shows how the full build improvements help to accommodate additional personnel at NPMC by reducing delays to better than pre-BRAC '2011 No-Build' conditions. With sequential construction of the improvements, the full-build congestion mitigations are projected to reduce vehicle delay by 60% during the AM peak hour from 135.7 sec/vehicle to 54.4 sec/vehicle, and by 69% during the PM peak hour from 167.5 sec/vehicle to 52.3 sec/ vehicle.

Table 1: Delay Time & Percent Reduction

MD 355 at W. Cedar Lane / Cedar Lane		2011 No Build	Phases 1-3		Phase 4		Full Build	
		Delay	Delay	Reduction	Delay	Reduction	Delay	Reduction
Peak Hour	AM	135.7 s	63.0 s	54%	54.4 s	14%	54.4 s	60%
	PM	167.5 s	60.8 s	64%	52.3 s	14%	52.3 s	69%

Note 1: Phases are sequential. Delay times reflect phases being constructed in order, not individually.

Note 2: Full build delay is compared to no build delay.

- **M-NCPPC Land Acquisition Mitigation**

The MD 320 (Piney Branch Road) at Sligo Creek Parkway project consists of constructing a pedestrian bridge on the Anacostia Tributary Trail over Sligo Creek to improve the safety for the trail's users. The project is located in Montgomery County on Maryland-National Capital Park and Planning Commission (M-NCPPC) property. The proposed trail improvements are mitigation for land acquisition of M-NCPPC property required for the construction of the MD 355 at Cedar Lane intersection improvement project.

The proposed improvements for the pedestrian bridge project are located in the southeast quadrant of the MD 320 (Piney Branch Road)/Sligo Creek Parkway intersection. The scope of this project includes constructing a pedestrian bridge, approximately 110 feet long and 10 feet wide, over Sligo Creek along the Anacostia Tributary Trail. The existing trail comes from the west and follows the south side of Sligo Creek Parkway to the west of the intersection. After the trail crosses MD 320, it continues along the east side of MD 320 on a narrow 41-inch concrete sidewalk on the roadway bridge over Sligo Creek. The trail then turns away from the road and continues along the south side of Sligo Creek. The proposed pedestrian bridge will eliminate the need to use the narrow sidewalk along MD 320 and will allow trail users to cross Sligo Creek immediately after crossing the intersection of MD 320/Sligo Creek Parkway. The project also involves realigning the trail to tie in to the proposed pedestrian bridge.

There are clear benefits of the project. Construction of the proposed pedestrian bridge will provide sufficient width for both directions of trail traffic to cross. The existing sidewalk is very close to the narrow MD 320 travel lanes with no shoulder. Moving the pedestrians and bicyclists away from traffic and into the park area will enhance the safety and environment of their trail experience. The trail is very well used by both pedestrians and bicyclists, for fitness and pleasure related travel. The quality of life and the trail experience will be improved by moving more of the user experience away from motor vehicle traffic. The benefits of this project clearly demonstrate enhancements to safety and the overall trail experience.

D. PROJECT ENGINEERING INFORMATION:

During Preliminary Engineering Design, SHA decided to reduce the project scope to minimize the impacts to adjacent residential properties and environmental resources. The measures that have been taken by SHA to reduce impacts include use of narrow lane widths, tightening intersection geometrics, and evaluation of various lane configurations to reduce the typical section adjustments.

These changes have increased the technical feasibility of the project, which is depicted in a rendering of the project's footprint in Figures 2 and 3.

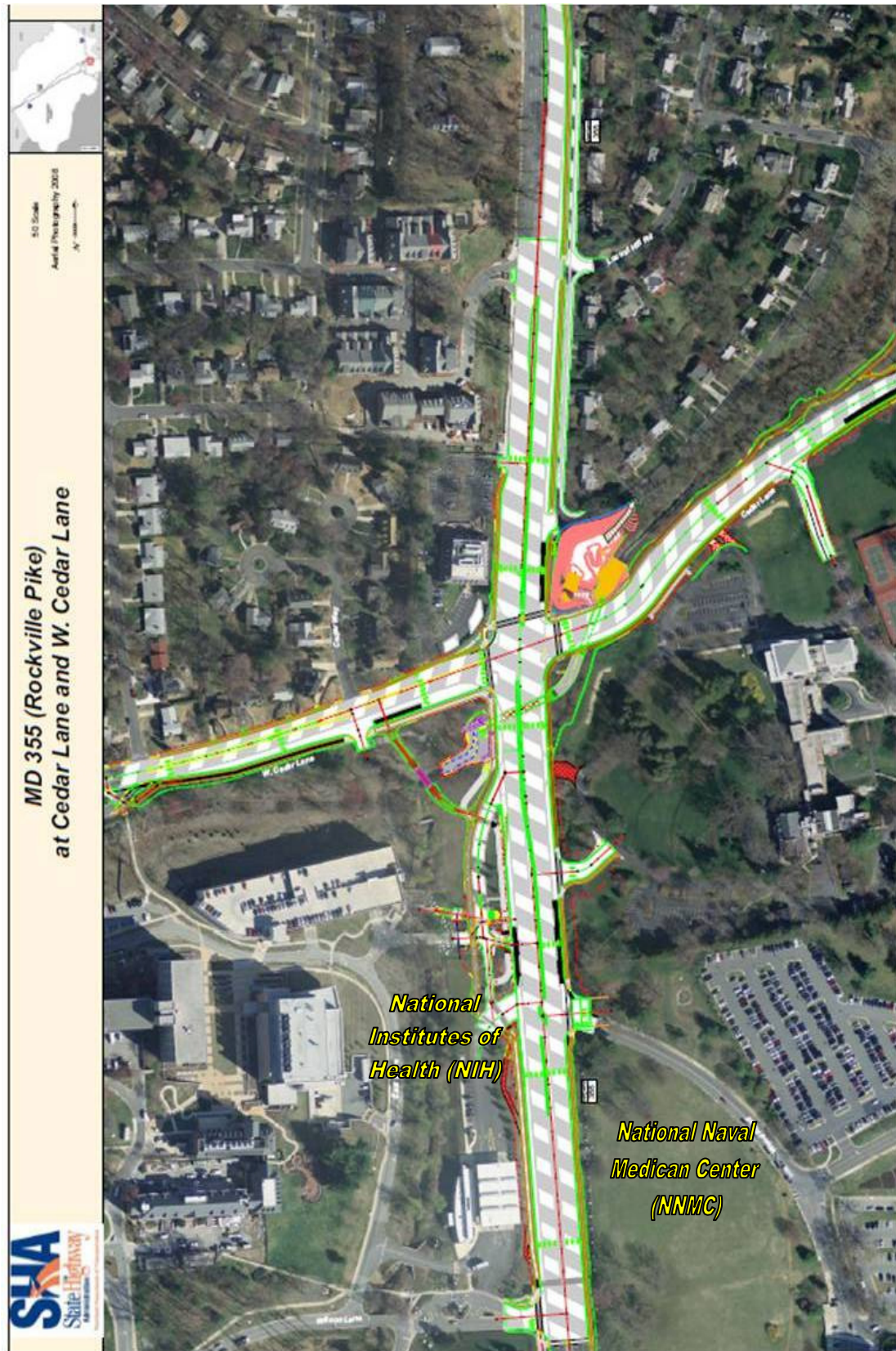


Figure 2: MD 355 (Rockville Pike) and West Cedar Lane / Cedar Lane, Phase 1 – 4

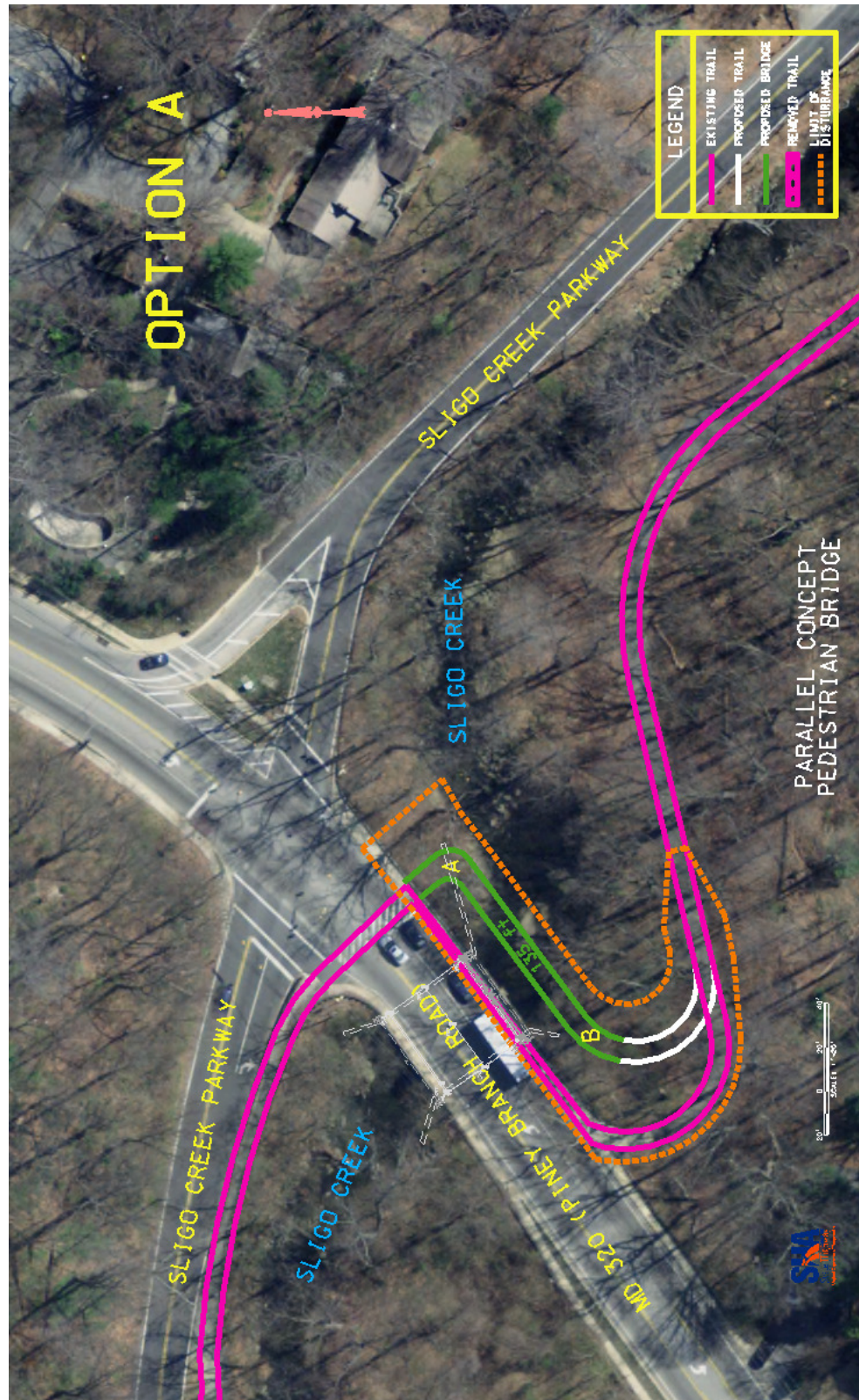


Figure 3: M-NCPPC Land Acquisition Mitigation

E. PROJECT PARTIES:

- The following stakeholders were directly involved in the project development process:
 - Maryland Department of Transportation (MDOT)
 - Maryland State Highway Administration (SHA)
 - Montgomery County Department of Transportation (MCDOT)
 - Federal Highway Administration (FHWA)
 - Maryland Transit Administration
 - Washington Metropolitan Area Transit Authority (WMATA)
 - Naval Support Activity-Bethesda
 - National Institutes of Health (NIH)
 - Maryland-National Capital Park and Planning Commission (M-NCPPC)
 - National Capital Planning Commission
 - Bethesda-Chevy Chase Regional Services
 - BRAC Implementation Committee
 - NIH's Community Liaison Council
 - Locust Hill Civic Association
 - Bethesda Parkview Citizens Association
 - Maplewood Citizens Association
 - Stone Ridge School of the Sacred Heart

F. GRANT FUNDS AND OTHER SOURCES OF FUNDS:

The SHA currently has a funding level of approximately \$44 million for all five improvement projects. The sources of funding can be seen in Table 2.

Table 2: Current Sources of Funding

Source	Funding
OEA	\$450,000
State	\$3,786,000
Federal	\$39,796,000
Total	\$44,032,000

Table 3: Cost Breakdown for Each Project

Project	Total	Funded	Unfunded
MD 355 (Rockville Pike) and W. Cedar Lane / Cedar Lane	\$50.2 M	\$31.2 M	\$19.0 M
MD 185 (Connecticut Avenue) and Jones Bridge Road / Kensington Parkway	\$29.7 M	\$11.4 M	\$18.3 M
MD 187 (Old Georgetown Road) and West Cedar Lane / Oakmont Avenue	\$8.0 M	\$0.7 M	\$7.3 M
MD 355 (Rockville Pike) and Jones Bridge Road / Center Drive	\$5.0 M	\$0.7 M	\$4.3 M
Bethesda Trolley Trail Connections And Passenger Drop-Off Loop	\$1.1 M	\$0.0 M	\$1.1 M

Table 4: Unfunded Costs

Current Funding Level		\$31.2 M
Total Estimated Cost		\$50.2 M
MD 355 and W. Cedar Lane / Cedar Lane Phases 1 - 3	\$36.3 M	
MD 355 and W. Cedar Lane / Cedar Lane Phase 4	\$11.8 M	
M-NCPPC Land Acquisition Mitigation	\$2.1 M	
Total Unfunded Costs for Proposed OEA Projects		\$19.0 M

G. USES OF CONSTRUCTION PROJECT FUNDS:

- MD 355 and W. Cedar Lane / Cedar Lane Phases 1 - 3
 - Preliminary and Final Engineering Design - \$2.4 million (Funded)
 - Land Acquisition - \$7.03 million (Funded)
 - Construction (including Utilities) - \$26.9 million (Partially Funded)
- MD 355 and W. Cedar Lane / Cedar Lane Phase 4
 - Preliminary and Final Engineering Design - \$1.1 million (Funded)
 - Land Acquisition - \$0.008 million (Unfunded)
 - Construction (including Utilities) - \$10.7 million (Unfunded)
- M-NCPPC Land Acquisition Mitigation
 - Preliminary and Final Engineering Design - \$0.6 million (Funded)
 - Land Acquisition – N/A
 - Construction (including Utilities) - \$1.5 million (Unfunded)

Note: Project Administration / Inspection Costs are accounted for in above bulleted items

H. PROJECT SCHEDULE:

- MD 355 and W. Cedar Lane / Cedar Lane Phases 1 - 3
 - Preliminary and Final Engineering Design Complete – 08/14/2012
 - National Environmental Policy Act (NEPA)- Environmental Compliance Approved – 12/02/2009
 - Land Acquisition Complete – 10/02/2012
 - Utility Relocation Complete – 01/08/2012
 - Construction Start – 01/08/2012
 - Construction Complete – 01/06/2015
- MD 355 and W. Cedar Lane / Cedar Lane Phase 4
 - Preliminary and Final Engineering Design Complete – 14 months
 - NEPA- Environmental Compliance Approval – 10 months
 - Land Acquisition Complete – 20 months
 - Utility Relocation Complete – 30 months
 - Construction Start – 30 months
 - Construction Complete – 45 months
- M-NCPPC Land Acquisition Mitigation
 - Preliminary and Final Engineering Design Complete – 16 months
 - NEPA- Environmental Compliance Approval – 18 months
 - Land Acquisition Complete – N/A
 - Utility Relocation Complete – 18 months
 - Construction Start – 20 months
 - Construction Complete – 33 months

Note: All time frames are from the date funding is received

I. ENVIRONMENTAL APPROVALS:

- MD 355 and W. Cedar Lane / Cedar Lane Phases 1 - 3
 - To meet the NEPA requirements, a Category Exclusion (CE) was required and approved on December 13, 2010
 - A SWM/ Erosion & Sediment (E&S) Control submittal was made to Maryland Department of the Environment (MDE) to procure a permit under the 2001 SWM regulations on July 6, 2011, and final approval is anticipated by the completion of Preliminary and Final Engineering Design.
 - A Joint Permit Application (JPA) submittal was made on July 8, 2011 to MDE and U.S. Army Corps of Engineers for stream impacts within Water of the U.S.; the final approval is anticipated by the completion of Preliminary and Final Engineering Design.

MD 355 (Rockville Pike) and West Cedar Lane / Cedar Lane

- A Roadside Tree Permit will be submitted to Maryland Department of Nature Resource for approval, and the approval is anticipated by the completion of Preliminary and Final Engineering Design.
- MD 355 and W. Cedar Lane / Cedar Lane Phase 4
 - NEPA – 10 months
 - SWM, E&S – 18 months
- M-NCPPC Land Acquisition Mitigation
 - NEPA – 18 months
 - SWM, E&S – 18 months
 - Wetland Permit – 18 months

Note: All time frames are from the date funding is received

J. STATE AND LOCAL PLANNING:

- Transportation Improvement Program (TIP)

The National Capital Region Transportation Planning Board (TPB) is the designated Metropolitan Planning Organization for the Washington Metropolitan Area. The TPB approved the 2011-2016 TIP, a 6-year financial program that describes the schedule for obligating federal funds to state and local projects, on November 12, 2010. The TIP contains funding information for all modes of transportation in Suburban Maryland, Northern Virginia, and the District of Columbia to include highways with High Occupancy Vehicles as well as transit capital and operating costs.

The TPB conducted a public comment period and a public forum on October 14, 2010 to go over the projects in the 2011-2016 TIP. The Air Quality Conformity Determination for the FY 2011-2016 TIP demonstrates that all required emissions tests are being met and conforms to all requirements of the Clean Air Act Amendments of 1990.

The Bethesda BRAC intersection improvement projects appear in the Suburban Maryland portion under the SHA tab of the 2011 TIP, specifically page M-2, line 2. At this time, the description includes, as one line item, all four major intersections of the SHA Intersection Improvement project listed in Section B. However, as additional phases of these projects get funded, they will get split up accordingly and amended into the TIP as individual projects. The latest draft of the MDOT Consolidated Transportation Program (CTP) has MD 355 (Rockville Pike) and W. Cedar Lane / Cedar Lane and MD 185 (Connecticut Avenue) and Jones Bridge Road / Kensington Parkway listed as separate projects, since a portion of them are funded. In addition to the intersection projects, SHA will also be constructing as a separate project, a hiker/biker trail that provides a direct link between Bethesda and Rockville, Maryland, which will also be amended into the TIP as a stand alone project.

- Statewide Transportation Improvement Program (STIP)

The Fiscal Year 2011 Maryland STIP is a four-year, fiscally constrained, and prioritized set of transportation projects, compiled from statewide, local, and regional plans. In the case of the Bethesda BRAC intersection improvement projects, the STIP includes the approved 2011 TIP from the Washington Region.

A key component of the STIP process is the Annual Consultation Process, known as the Fall Tour, which is a process stipulated by State law requiring the Secretary of Transportation to visit with, and present to each of the State's county jurisdictions the annual draft of Maryland's six-year capital investment program known as the CTP. The Bethesda BRAC intersection improvement projects have been formally presented in the CTP since 2008.

Maryland's 2011 STIP, which has been approved by FHWA, includes the Bethesda BRAC intersection improvement projects because it is listed in the 2011 TIP for the Washington Region.

K. GRANTS MANAGEMENT:

The SHA successfully administers over \$600 million each year in federal funding which is made up of formula apportionments, allocated program funds, discretionary program funds (either Congressionally designated or awarded by FHWA), and other special federal funding, (e.g., Department of Defense OEA grants).

The Federal-aid Highway Program is a reimbursable program, and has been since the early part of the 20th Century. That means the Federal Government only reimburses States for costs actually incurred - in contrast to a pre-paid grant program. Projects are put under agreement with FHWA (approved), work is started with State dollars and then FHWA is invoiced for payment of pre-approved amounts.

Approximately 46% of the 2011-2016 MDOT CTP Capital Program (\$9.5 billion) is administered by SHA.

Two excellent examples of SHA's ability to oversee and deliver projects on time and on budget are the Woodrow Wilson Bridge (WWB) and the Intercounty Connector (ICC).

- Woodrow Wilson Bridge (WWB)

In October 2008 Maryland, along with Virginia, was awarded the 2008 *America's Transportation Award* Grand Prize by the American Association of State Highway and Transportation Officials (AASHTO). The WWB was selected for being on-time, on budget and most importantly for its innovative management in areas of the environment, safety, construction management and financial planning. It was called a "premier example of innovative management," for its collaborative efforts to keep this \$2.47 billion project on time and on budget while coordinating four sponsoring agencies: FHWA, SHA, Virginia Department of Transportation (VDOT), and the District of Columbia Department of Transportation. The award included \$10,000 for Maryland to use for transportation-related educational scholarships.

- Intercounty Connector (ICC)

The ICC has been selected to receive the 2011 AASHTO *President's Transportation Award for Highways*. This \$2.56 billion mega-project was selected for the innovative management approach undertaken by the *ICC Team* to deliver one of the first three all electronic toll (AET) highways on new alignment to open in the United States. The *ICC Team* kept the project on schedule, on budget, set precedents for handling sensitive environmental areas, exceeded goals for disadvantaged business enterprise participation, and executed a successful community outreach program, all critical to the project's success. As a transportation facility more than 50 years in the making, the ICC sets a national standard for both environmental protection/stewardship and the provision of a high quality and safe AET facility.

L. SUBMITTING OFFICIAL:

As Acting Administrator of the Maryland State Highway Administration, appointed by the Secretary of the Maryland Department of Transportation in July of 2011, I am pleased to submit the following five grant proposals for the Office of Economic Adjustment's (OEA) consideration in connection with its grant program for transportation projects in support of Base Realignment and Closure (BRAC) consolidations at military medical facilities. The five submissions include grant proposals for OEA funding for the following five transportation improvement projects:

1. MD 355 (Rockville Pike) and W. Cedar Lane / Cedar Lane;
2. MD 185 (Connecticut Avenue) and Jones Bridge Road / Kensington Parkway;
3. MD 187 (Old Georgetown Road) and West Cedar Lane / Oakmont Avenue;
4. Bethesda Trolley Trail Connections And Passenger Drop-Off Loop, and;
5. MD 355 (Rockville Pike) and Jones Bridge Road / Center Drive.

Together with additional critical improvements in development by the Montgomery County Department of Transportation as part of its Maryland Route 355 Multimodal Crossing Project, these projects will collectively serve to help mitigate the impacts of BRAC at the newly created Walter Reed National Military Medical Center, and ensure that the transportation network at the Bethesda campus effectively supports the Installation's mission, and provides for safe, efficient travel, by automobile, bicycle, and on foot, for all members of the local community.

The priority projects detailed herein reflect the exhaustive collaboration of local, state and BRAC stakeholders in the region, and their shared commitment to developing multi-modal solutions for the transportation challenges associated with BRAC. I appreciate your consideration of our submission, and look forward to the expeditious implementation of these critical projects in the coming months and years.

Thank you again for your consideration.

Darrell B. Mobley
Acting Administrator
State Highway Administration
707 North Calvert Street
Baltimore MD 21202
410-545-0400
dmobley@mdot.state.md.us

Attachment A:

DEPARTMENT OF THE NAVY
WALTER REED NATIONAL MILITARY MEDICAL CENTER (20889-5600)
NAVAL SUPPORT ACTIVITY BETHESDA (20889-5600)
BETHESDA MARYLAND

IN REPLY REFER TO

NAVSUPPACT Bethesda
11000
Ser N00/0174
4 Oct 11

WRNMMC Bethesda
11000
Ser 00/2570
4 Oct 11

JOINT LETTER

Mr. Darrell B. Mobley
Acting Administrator
State Highway Administration
707 North Calvert Street
Baltimore, MD 21202
Mail Stop: C-400

Dear Mr. Mobley:

As the Commander, Walter Reed National Military Medical Center (WRNMMC) and the Commanding Officer, Naval Support Activity Bethesda (NSAB) we provide this letter for Montgomery County and Maryland officials who are seeking funding for traffic projects that impact our organizations. Montgomery County is submitting a request to fund the design and construction of a Metro Crossing project that will provide direct access to the Medical Center Metro Station from the NSAB campus for commuters and visitors using rail, bus, and car or van pools, as well as bicyclists and pedestrians. This urgently needed project will help ease and seek to prevent untenable gridlock and provide timely access to the installation by enabling thousands of personnel and visitors who come to WRNMMC and NSAB every day to use transit and other alternatives instead of driving alone.

The State of Maryland is requesting funds for four separate major intersection improvement projects that serve WRNMMC and NSAB: MD 355 at Cedar Lane; MD 185 at Jones Bridge Road; MD 187 at West Cedar Lane; and MD 355 at Jones Bridge Road. These projects will improve traffic operations and pedestrian safety at these currently failing intersections, even with the increased volume of traffic that will be drawn to WRNMMC and NSAB. Furthermore, the State of Maryland will seek to improve MD 187 (Old Georgetown Road) by expanding a regional network of paths that are used by thousands of cycling and pedestrian commuters every day.

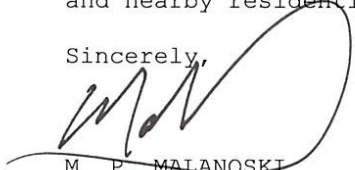
MD 355 (Rockville Pike) and West Cedar Lane / Cedar Lane

NAVSUPPACT Bethesda
11000
Ser N00/0174

WRNMMC Bethesda
11000
Ser 00/2570

Despite BRAC construction of three parking structures, there exists a parking shortfall of approximately 1,300 spaces for staff parking. Currently, a significant portion of parking in the new structures is reserved for patients and their visitors. WRNMMC is now the primary hospital that first receives all of our Nation's wounded, ill, and injured from overseas facilities. In addition, there will be a loss of approximately 750 additional parking spaces to support necessary construction. Given the lack of staff parking, there has been a significant increase in the number of staff members requiring the use of alternative modes of transportation to include mass transit, cycling, and walking. The proposed transportation infrastructure projects would provide comprehensive improvements to traffic operations while promoting pedestrian safety and greater use of these alternate modes of transportation. In addition, increased access to the existing network of bicycle and pedestrian paths will encourage greater use of alternative transportation modes and remove more vehicles from an already highly congested Medical Center area. In short, the proposed infrastructure projects would not only enable the staff at WRNMMC to successfully complete its mission, providing world-class medical care, but would also benefit the surrounding community, which includes the National Institutes of Health, the Bethesda Urban District, and nearby residential communities.

Sincerely,



M. P. MALANOSKI
Captain, Medical Corps
U.S. Navy
Commanding Officer
Naval Support Activity
Bethesda

Sincerely,



A. L. STOCKS
Rear Admiral, Medical Corps
U.S. Navy
Commander
Walter Reed National
Military Medical Center